## EXHIBIT D

Part 7

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			Claim Number
			Date Received
		BERNARD L. MADOFF INVESTMENT SECURI	TIES LLC
		In Liquidation	
(Please ]	print (	DECEMBER 11, 2008 or type)	*
Mailing	Addr		
Account	No.:	delphia State: Pennsylvania 1-W0106-3-0 (Westport National Bank) Number (Social Security No.):	
NOTE:	THI SH PR RE RE SU LES	FORE COMPLETING THIS CLAIM FORM, BE SURE ACCOMPANYING INSTRUCTION SHEET. A SE OULD BE FILED FOR EACH ACCOUNT AND, TO OTECTION AFFORDED UNDER SIPA, ALL CUSTO CEIVED BY THE TRUSTEE ON OR BEFORE MACCEIVED AFTER THAT DATE, BUT ON OR BEFORE BJECT TO DELAYED PROCESSING AND TO BEING SIS FAVORABLE TO THE CLAIMANT. PLEASE SEND RTIFIED MAIL - RETURN RECEIPT REQUESTED.	PARATE CLAIM FORM O RECEIVE THE FULL MER CLAIMS MUST BE Arch 4, 2009. CLAIMS July 2, 2009, WILL BE SATISFIED ON TERMS YOUR CLAIM FORM BY
1.	Clai	m for money balances as of December 11, 2008:	
	a.	The Broker owes me a Credit (Cr.) Balance of	\$
	b.	I owe the Broker a Debit (Dr.) Balance of	\$
	C.	If you wish to repay the Debit Balance,	
		please insert the amount you wish to repay and	
		attach a check payable to "Irving H. Picard, Esq.	i

Trustee for Bernard L. Madoff Investment Securities LLC."

If you wish to make a payment, it must be enclosed

1

with this claim form.

If balance is zero, insert "None."

d.

#### 2. Claim for securities as of December 11, 2008:

#### PLEASE DO NOT CLAIM ANY SECURITIES YOU HAVE IN YOUR POSSESSION.

		_	YES	NO
Ä	a.	The Broker owes me securities valued at \$46,162.59 as of November 30, 2	X	
	b.	I owe the Broker securities		
	C.	If yes to either, please list below:		
			Number o Face Amou	f Shares or nt of Bonds
Date of Transaction (trade date		Name of Security	The Broker Owes Me (Long)	I Owe the Broker (Short)
Plea	<u>se</u> se	e the attached supporting documentation ar	nd ac <u>compan</u> ying	l <u>etter</u>
	-			
	_		<del></del>	
			<del></del>	

Proper documentation can speed the review, allowance and satisfaction of your claim and shorten the time required to deliver your securities and cash to you. Please enclose, if possible, copies of your last account statement and purchase or sale confirmations and checks which relate to the securities or cash you claim, and any other documentation, such as correspondence, which you believe will be of assistance in processing your claim. In particular, you should provide all documentation (such as cancelled checks, receipts from the Debtor, proof of wire transfers, etc.) of your deposits of cash or securities with the Debtor from as far back as you have documentation. You should also provide all documentation or information regarding any withdrawals you have ever made or payments received from the Debtor.

Please explain any differences between the securities or cash claimed and the cash balance and securities positions on your last account statement. If, at any time, you complained in writing about the handling of your account to any person or entity or regulatory authority, and the complaint relates to the cash and/or securities that you are now seeking, please be sure to provide with your claim copies of the complaint and all related correspondence, as well as copies of any replies that you received.

PLEASE CHECK THE APPROPRIATE ANSWER FOR ITEMS 3 THROUGH 9.

# NOTE: IF "YES" IS MARKED ON ANY ITEM, PROVIDE A DETAILED EXPLANATION ON A SIGNED ATTACHMENT. IF SUFFICIENT DETAILS ARE NOT PROVIDED, THIS CLAIM FORM WILL BE RETURNED FOR YOUR COMPLETION.

	91 89 81	<u>YES</u>	<u>NO</u>
3.	Has there been any change in your account since December 11, 2008? If so, please explain.	5 <u></u> 5,	X
4.	Are you or were you a director, officer, partner, shareholder, lender to or capital contributor of the broker?		X
. 5.	Are or were you a person who, directly or indirectly and through agreement or otherwise, exercised or had the power to exercise a controlling influence over the management or policies of the broker?		X
6.	Are you related to, or do you have any business venture with, any of the persons specified in "4" above, or any employee or other person associated in any way with the broker? If so, give name(s)		X
7.	Is this claim being filed by or on behalf of a broker or dealer or a bank? If so, provide documentation with respect to each public customer on whose behalf you are claiming.		X
8.	Have you ever given any discretionary authority to any person to execute securities transactions with or through the broker on your behalf? Give names, addresses and phone numbers.		X
9.	Have you or any member of your family ever filed a claim under the Securities Investor Protection Act of 1970? if so, give name of that broker.		X
	Please list the full name and address of anyone as preparation of this claim form: Deborah Clark-Wei Kallas, LLC, 1540 Broadway, 37th Floor, New York	ntraub. Whatley Dr	

IT IS A VIOLATION OF FEDERAL LAW TO FILE A FRAUDULENT CLAIM. CONVICTION CAN RESULT IN A FINE OF NOT MORE THAN \$50,000 OR IMPRISONMENT FOR NOT MORE THAN FIVE YEARS OR BOTH.

THE FOREGOING CLAIM IS TRUE AND ACCURATE TO THE BEST OF MY INFORMATION AND BELIEF.

Date	2/17/2009	Signature	Day jed	the	
Date	AMERICAN SHAPE OF THE STATE OF	Signature	. / /	1.	1 -

(If ownership of the account is shared, all must sign above. Give each owner's name, address, phone number, and extent of ownership on a signed separate sheet. If other than a personal account, e.g., corporate, trustee, custodian, etc., also state your capacity and authority. Please supply the trust agreement or other proof of authority.)

This customer claim form must be completed and mailed promptly, together with supporting documentation, etc. to:

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$\mathbf{U}$	ЭI	VIV	IER		MIA.	и

Claim Number	
Date Received	١.,

### BERNARD L. MADOFF INVESTMENT SECURITIES LLC

		In Liquidation	
(Dlagge		DECEMBER 11, 2008	
(Please	print	or type)	
		tomer: Randi D. Leigh, Randi D. Leigh Roth IRA ress: 6910 Sherman Street	
Accoun	t No.:	delphia State: <u>Pennsylvania</u> 2 <u>1-W0106-3-0 (Westport National Bank)</u> D. Number (Social Security No.):	Zip: <u>19119</u>
NOTE:	BE TH SH PR RE RE SU LE CE	FORE COMPLETING THIS CLAIM FORM, BE SURE TO ACCOMPANYING INSTRUCTION SHEET. A SEPTIOULD BE FILED FOR EACH ACCOUNT AND, TO COTECTION AFFORDED UNDER SIPA, ALL CUSTOM CEIVED BY THE TRUSTEE ON OR BEFORE MARKED AFTER THAT DATE, BUT ON OR BEFORE BJECT TO DELAYED PROCESSING AND TO BEING SS FAVORABLE TO THE CLAIMANT. PLEASE SEND RETIFIED MAIL - RETURN RECEIPT REQUESTED.	PARATE CLAIM FORM RECEIVE THE FULL IER CLAIMS MUST BE 10th 4, 2009. CLAIMS July 2, 2009, WILL BE SATISFIED ON TERMS YOUR CLAIM FORM BY
1.	Cla	im for money balances as of December 11, 2008:	
	a.	The Broker owes me a Credit (Cr.) Balance of	\$
	b.	I owe the Broker a Debit (Dr.) Balance of	\$
	Ċ.	If you wish to repay the Debit Balance,	000000000000000000000000000000000000000
		please insert the amount you wish to repay and	
		attach a check payable to "Irving H. Picard, Esq.,	
		Trustee for Bernard L. Madoff Investment Securities	es LLC."
		If you wish to make a payment, it must be enclos	ed
		with this claim form.	\$
	d.	If balance is zero, insert "None."	

1

Claim for securities as of December 11, 2008:

### PLEASE DO NOT CLAIM ANY SECURITIES YOU HAVE IN YOUR POSSESSION.

			YES	NO_
	a.	The Broker owes me securities valued at \$71,612.76 as of November 30;	<u> </u>	
	b.	I owe the Broker securities	2008.	e"
	C.	If yes to either, please list below:		
				of Shares or unt of Bonds
Date of Transact (trade da	ion	Name of Security	The Broker Owes Me (Long)	f Owe the Broker (Short)
Plea	ase se	ee the attached supporting documentation ar	nd ac <u>compan</u> ying	letter
			- symme	
			· · · · · · · · · · · · · · · · · · ·	
	_			
		The state of the s		

Proper documentation can speed the review, allowance and satisfaction of your claim and shorten the time required to deliver your securities and cash to you. Please enclose, if possible, copies of your last account statement and purchase or sale confirmations and checks which relate to the securities or cash you claim, and any other documentation, such as correspondence, which you believe will be of assistance in processing your claim. In particular, you should provide all documentation (such as cancelled checks, receipts from the Debtor, proof of wire transfers, etc.) of your deposits of cash or securities with the Debtor from as far back as you have documentation. You should also provide all documentation or information regarding any withdrawals you have ever made or payments received from the Debtor.

Please explain any differences between the securities or cash claimed and the cash balance and securities positions on your last account statement. If, at any time, you complained in writing about the handling of your account to any person or entity or regulatory authority, and the complaint relates to the cash and/or securities that you are now seeking, please be sure to provide with your claim copies of the complaint and all related correspondence, as well as copies of any replies that you received.

NOTE: IF "YES" IS MARKED ON ANY ITEM, PROVIDE A DETAILED EXPLANATION ON A SIGNED ATTACHMENT. IF SUFFICIENT DETAILS ARE NOT PROVIDED, THIS CLAIM FORM WILL BE RETURNED FOR YOUR COMPLETION.

		<u>YES</u>	NO
3.	Has there been any change in your account since December 11, 2008? If so, please explain.		X
4.	Are you or were you a director, officer, partner, shareholder, lender to or capital contributor of the broker?	X	X
5.	Are or were you a person who, directly or indirectly and through agreement or otherwise, exercised or had the power to exercise a controlling influence over the management or policies of the broker?	, All	X
6.	Are you related to, or do you have any business venture with, any of the persons specified in "4" above, or any employee or other person associated in any way with the broker? If so, give name(s)	·	X
7.	Is this claim being filed by or on behalf of a broker or dealer or a bank? If so, provide documentation with respect to each public customer on whose behalf you are claiming.		X
8.	Have you ever given any discretionary authority to any person to execute securities transactions with or through the broker on your behalf? Give names, addresses and phone numbers.		Χ
9.	Have you or any member of your family ever filed a claim under the Securities Investor Protection Act of 1970? if so, give name of that broker.		X
	Please list the full name and address of anyone ass preparation of this claim form: Deborah Clark-Weint Kallas, LLC, 1540 Broadway, 37th Floor, New Yor	traub, Whatley Di	

3

IT IS A VIOLATION OF FEDERAL LAW TO FILE A FRAUDULENT CLAIM. CONVICTION CAN RESULT IN A FINE OF NOT MORE THAN \$50,000 OR IMPRISONMENT FOR NOT MORE THAN FIVE YEARS OR BOTH.

THE FOREGOING CLAIM IS TRUE AND ACCURATE TO THE BEST OF MY INFORMATION AND BELIEF.

Date 2/17/2009	Signature Kand Keich
Date	Signature

(If ownership of the account is shared, all must sign above. Give each owner's name, address, phone number, and extent of ownership on a signed separate sheet. If other than a personal account, e.g., corporate, trustee, custodian, etc., also state your capacity and authority. Please supply the trust agreement or other proof of authority.)

This customer claim form must be completed and mailed promptly, together with supporting documentation, etc. to:

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υı	JO.	V.	CK		LAI	IVI

Claim Number	
Date Received	_
JRITIES LLC	

#### BERNARD L. MADOFF INVESTMENT SECU

		in Liquidation	
		DECEMBER 11, 2008	
(Please	print (	or type)	
Mailing City:	Addr Easto	State: Connecticut Z	ip: 06612
Account	No.:	1-W0106-3-0 (Westport National Bank) Number (Social Security No.):	
Tuapuy	. 1,1).	Administration (Social Security 10.).	
NOTE:	THE SHO PRO REC SUE LES	FORE COMPLETING THIS CLAIM FORM, BE SURE TO ACCOMPANYING INSTRUCTION SHEET. A SEPA OULD BE FILED FOR EACH ACCOUNT AND, TO DIECTION AFFORDED UNDER SIPA, ALL CUSTOME CEIVED BY THE TRUSTEE ON OR BEFORE MAY CEIVED AFTER THAT DATE, BUT ON OR BEFORE AS SECT TO DELAYED PROCESSING AND TO BEING SECT TO DELAYED PROCESSING AND TO BEING SECT TO DELAYED PROCESSING AND TO BEING SECTIFIED MAIL - RETURN RECEIPT REQUESTED.	ARATE CLAIM FORM RECEIVE THE FULL ER CLAIMS MUST BE In 4, 2009. CLAIMS July 2, 2009, WILL BE ATISFIED ON TERMS OUR CLAIM FORM BY
1.	Clair	m for money balances as of <b>December 11, 2008</b> :	
	a.	The Broker owes me a Credit (Cr.) Balance of	\$
	b.	I owe the Broker a Debit (Dr.) Balance of	\$
	C.	If you wish to repay the Debit Balance,	
		please insert the amount you wish to repay and	
		attach a check payable to "Irving H. Picard, Esq.,	
		Trustee for Bernard L. Madoff Investment Securitie	s LLC."
		If you wish to make a payment, it must be enclose	ed
		with this claim form.	\$
	d.	If balance is zero, insert "None."	

#### 2. Claim for securities as of **December 11, 2008**:

#### PLEASE DO NOT CLAIM ANY SECURITIES YOU HAVE IN YOUR POSSESSION.

					Y	<u>ES</u>	NC	)
а			me securition			<u> </u>		
b		the Broker						
С	. If yes	to either, p	lease list bel	ow:				
						Number Face Amo		
Date of Transactio (trade date		Na	ame of Secu	rity		The Broker Owes Me (Long)	the	we Broker hort)
Pleas	e see the	<u>attached si</u>	upporting doc	cumentation	_and ac	companyin	g l <u>etter</u>	
	_				-	<del></del> -	L <del>us rents</del>	
	<u></u>				-			
	<u>V+</u> E						-	

Proper documentation can speed the review, allowance and satisfaction of your claim and shorten the time required to deliver your securities and cash to you. Please enclose, if possible, copies of your last account statement and purchase or sale confirmations and checks which relate to the securities or cash you claim, and any other documentation, such as correspondence, which you believe will be of assistance in processing your claim. In particular, you should provide all documentation (such as cancelled checks, receipts from the Debtor, proof of wire transfers, etc.) of your deposits of cash or securities with the Debtor from as far back as you have documentation. You should also provide all documentation or information regarding any withdrawals you have ever made or payments received from the Debtor.

Please explain any differences between the securities or cash claimed and the cash balance and securities positions on your last account statement. If, at any time, you complained in writing about the handling of your account to any person or entity or regulatory authority, and the complaint relates to the cash and/or securities that you are now seeking, please be sure to provide with your claim copies of the complaint and all related correspondence, as well as copies of any replies that you received.

PLEASE CHECK THE APPROPRIATE ANSWER FOR ITEMS 3 THROUGH 9.

08-01789-cgm Doc 4111-20 Filed 05/27/11 Entered 05/27/11 17:31:44 Exhibit D Part 7 Pg 12 of 21

NOTE: IF "YES" IS MARKED ON ANY ITEM, PROVIDE A DETAILED EXPLANATION ON A SIGNED ATTACHMENT. IF SUFFICIENT DETAILS ARE NOT PROVIDED, THIS CLAIM FORM WILL BE RETURNED FOR YOUR COMPLETION.

		<u>YES</u>	NO
3.	-Has there been any change in your account since December 11, 2008? If so, please explain.		X
4.	Are you or were you a director, officer, partner, shareholder, lender to or capital contributor of the broker?		X
5.	Are or were you a person who, directly or indirectly and through agreement or otherwise, exercised or had the power to exercise a controlling influence over the management or policies of the broker?		X
6.	Are you related to, or do you have any business venture with, any of the persons specified in "4" above, or any employee or other person associated in any way with the broker? If so, give name(s)	·	X
7.	Is this claim being filed by or on behalf of a broker or dealer or a bank? If so, provide documentation with respect to each public customer on whose behalf you are claiming.	(	X
8.	Have you ever given any discretionary authority to any person to execute securities transactions with or through the broker on your behalf? Give names, addresses and phone numbers.		X
9.	Have you or any member of your family ever filed a claim under the Securities Investor Protection Act of 1970? if so, give name of that broker.		X
	Please list the full name and address of anyone ass preparation of this claim form: Deborah Clark-Weint Kallas, LLC, 1540 Broadway, 37th Floor, New York	raub, Whatley D	rake &

IT IS A VIOLATION OF FEDERAL LAW TO FILE A FRAUDULENT CLAIM. CONVICTION CAN RESULT IN A FINE OF NOT MORE THAN \$50,000 OR IMPRISONMENT FOR NOT MORE THAN FIVE YEARS OR BOTH.

THE FOREGOING CLAIM IS TRUE AND ACCURATE TO THE BEST OF MY INFORMATION AND BELIEF.

Date	2/16/2009	Signature Julyme & Lemman	
Date		Signature	

(If ownership of the account is shared, all must sign above. Give each owner's name, address, phone number, and extent of ownership on a signed separate sheet. If other than a personal account, e.g., corporate, trustee, custodian, etc., also state your capacity and authority. Please supply the trust agreement or other proof of authority.)

This customer claim form must be completed and mailed promptly, together with supporting documentation, etc. to:

CILC	TOR	CD	01	ATER
CUS		IEK.	UL	Alivi

	Claim Number
	Date Received
BERNARD L. MADOFF INVESTMENT SEC	CURITIES LLC
In Liquidation	
DECEMBER 11, 2008	
r type)	
omer: Barbara G. Levinson, Barbara G. Leess: 48 Dogwood Drive	
1State: <u>Connecticut</u> 1-W0106-3-0 (Westport National Bank)	tZip: <u>06612</u>
Number (Social Security No.):	
ORE COMPLETING THIS CLAIM FORM, BE SEACCOMPANYING INSTRUCTION SHEET. OULD BE FILED FOR EACH ACCOUNT AN OTECTION AFFORDED UNDER SIPA, ALL CUSEIVED BY THE TRUSTEE ON OR BEFORE EIVED AFTER THAT DATE, BUT ON OR BEING AFTER THAT DATE, BUT ON OR BEING TO DELAYED PROCESSING AND TO BE SEAVORABLE TO THE CLAIMANT. PLEASE STATIFIED MAIL - RETURN RECEIPT REQUESTE	SURE TO READ CAREFULLY A SEPARATE CLAIM FORM D, TO RECEIVE THE FULL JSTOMER CLAIMS MUST BE E March 4, 2009. CLAIMS FORE July 2, 2009, WILL BE SEING SATISFIED ON TERMS SEND YOUR CLAIM FORM BY

(Please p	orint o	DECEMBER 11, 2008 or type)	
Name of Mailing City: Account	Custo Addro Easto No.:	omer: Barbara G. Levinson, Barbara G. Levinson ess: 48 Dogwood Drive  State: Connecticut Zi	
NOTE:	THE SHO PRO REC SUE LES	FORE COMPLETING THIS CLAIM FORM, BE SURE TO E ACCOMPANYING INSTRUCTION SHEET. A SEPA DULD BE FILED FOR EACH ACCOUNT AND, TO DETECTION AFFORDED UNDER SIPA, ALL CUSTOME DEIVED BY THE TRUSTEE ON OR BEFORE March DEIVED AFTER THAT DATE, BUT ON OR BEFORE JUBIC TO DELAYED PROCESSING AND TO BEING SUBSTRUCT TO DELAYED PROCESSING AND TO BEING SUBSTRUCT TO THE CLAIMANT. PLEASE SEND YOUR THE CLAIMANT.	RATE CLAIM FORM RECEIVE THE FULL R CLAIMS MUST BE h 4, 2009. CLAIMS uly 2, 2009, WILL BE ATISFIED ON TERMS DUR CLAIM FORM BY
1.	Clair	n for money balances as of <b>December 11, 2008</b> :	
	a.	The Broker owes me a Credit (Cr.) Balance of	\$
	b.	I owe the Broker a Debit (Dr.) Balance of	\$
	C.	If you wish to repay the Debit Balance,	
		please insert the amount you wish to repay and	
		attach a check payable to "Irving H. Picard, Esq.,	
		Trustee for Bernard L. Madoff Investment Securities	LLC."
		If you wish to make a payment, it must be enclose	d
		with this claim form.	\$
	d.	If balance is zero, insert "None."	4.4.

Claim for securities as of December 11, 2008:

#### PLEASE DO NOT CLAIM ANY SECURITIES YOU HAVE IN YOUR POSSESSION.

			YES	NO
	a.	The Broker owes me securities valued at \$15,002.84 as of November 30	X 2008	
	b.	I owe the Broker securities		
	C.	If yes to either, please list below:		
				er of Shares or nount of Bonds
Date of Transacti (trade da	ion	Name of Security	The Brok Owes Me (Long)	
		ee the attached supporting documentation		,
	211 <u>——</u> 4			
		Name of the second seco	· ·	
167				
r 160		Se the attached supporting documentation	and accompany	

Proper documentation can speed the review, allowance and satisfaction of your claim and shorten the time required to deliver your securities and cash to you. Please enclose, if possible, copies of your last account statement and purchase or sale confirmations and checks which relate to the securities or cash you claim, and any other documentation, such as correspondence, which you believe will be of assistance in processing your claim. In particular, you should provide all documentation (such as cancelled checks, receipts from the Debtor, proof of wire transfers, etc.) of your deposits of cash or securities with the Debtor from as far back as you have documentation. You should also provide all documentation or information regarding any withdrawals you have ever made or payments received from the Debtor.

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PLEASE CHECK THE APPROPRIATE ANSWER FOR ITEMS 3 THROUGH 9.

# NOTE: IF "YES" IS MARKED ON ANY ITEM, PROVIDE A DETAILED EXPLANATION ON A SIGNED ATTACHMENT. IF SUFFICIENT DETAILS ARE NOT PROVIDED, THIS CLAIM FORM WILL BE RETURNED FOR YOUR COMPLETION.

		<u>YES</u>	<u>NO</u>
3.	Has there been any change in your account since December 11, 2008? If so, please explain.	10°	X
4.	Are you or were you a director, officer, partner, shareholder, lender to or capital contributor of the broker?		X
5.	Are or were you a person who, directly or indirectly and through agreement or otherwise, exercised or had the power to exercise a controlling influence over the management or policies of the broker?		X
6.	Are you related to, or do you have any business venture with, any of the persons specified in "4" above, or any employee or other person associated in any way with the broker? If so, give name(s)	•	X
7:	Is this claim being filed by or on behalf of a broker or dealer or a bank? If so, provide documentation with respect to each public customer on whose behalf you are claiming.		X
8.	Have you ever given any discretionary authority to any person to execute securities transactions with or through the broker on your behalf? Give names, addresses and phone numbers.	· communication	X
9.	Have you or any member of your family ever filed a claim under the Securities Investor Protection Act of 1970? if so, give name of that broker.		X
	Please list the full name and address of anyone ass preparation of this claim form: Deborah Clark-Wein Kallas, LLC, 1540 Broadway, 37th Floor, New Yor	traub, Whatley D	rake &

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THE FOREGOING CLAIM IS TRUE AND ACCURATE TO THE BEST OF MY INFORMATION AND BELIEF.

Date 2 16 2009	Signature Makeur le Jeunne
Date	Signature

(If ownership of the account is shared, all must sign above. Give each owner's name, address, phone number, and extent of ownership on a signed separate sheet. If other than a personal account, e.g., corporate, trustee, custodian, etc., also state your capacity and authority.)

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$\mathbf{c}$	JO	1	U	IVI	Τ.	UL	_A	IM

			Claim Number			
		I	Date Received			
		BERNARD L. MADOFF INVESTMENT SECURIT	IES LLC			
		In Liquidation				
		DECEMBER 11, 2008				
(Please p	orint (					
Mailing City: Account	Addro Philac No.:	omer:Gary P. Levinson, Gary P. Levinson Rothess:1420 Locust Street, Apt. 25C delphiaState: _Pennsylvania71-W0106-3-0 (Westport National Bank) Number (Social Security No.):	Cip: <u>19102</u>			
NOTE:	E: BEFORE COMPLETING THIS CLAIM FORM, BE SURE TO READ CAREFULLY THE ACCOMPANYING INSTRUCTION SHEET. A SEPARATE CLAIM FORM SHOULD BE FILED FOR EACH ACCOUNT AND, TO RECEIVE THE FULL PROTECTION AFFORDED UNDER SIPA, ALL CUSTOMER CLAIMS MUST BE RECEIVED BY THE TRUSTEE ON OR BEFORE March 4, 2009. CLAIMS RECEIVED AFTER THAT DATE, BUT ON OR BEFORE July 2, 2009, WILL BE SUBJECT TO DELAYED PROCESSING AND TO BEING SATISFIED ON TERMS LESS FAVORABLE TO THE CLAIMANT. PLEASE SEND YOUR CLAIM FORM BY CERTIFIED MAIL - RETURN RECEIPT REQUESTED.					
4	01-1					
1.	Clair	n for money balances as of December 11, 2008:				
	a.	The Broker owes me a Credit (Cr.) Balance of	\$			
	b.	I owe the Broker a Debit (Dr.) Balance of	\$			
	C.	If you wish to repay the Debit Balance,				
		please insert the amount you wish to repay and				
		attach a check payable to "Irving H. Picard, Esq.,				
		Trustee for Bernard L. Madoff Investment Securitie	es LLC."			
		If you wish to make a payment, it must be enclos				
		with this claim form.	\$			

If balance is zero, insert "None."

d.

#### Claim for securities as of December 11, 2008:

#### PLEASE DO NOT CLAIM ANY SECURITIES YOU HAVE IN YOUR POSSESSION.

			YES	NO			
	a.	The Broker owes me securities valued at \$257,477.93 as of November 30, 2	X				
, ii	b.	I owe the Broker securities					
	C.	If yes to either, please list below:					
				of Shares or unt of Bonds			
Date of Transact (trade da	tion	Name of Security	The Broker Owes Me (Long)	I Owe the Broker (Short)			
Please see the attached supporting documentation and accompanying letter							
			uiii u				
168416.180 · · ·							
				-			

Proper documentation can speed the review, allowance and satisfaction of your claim and shorten the time required to deliver your securities and cash to you. Please enclose, if possible, copies of your last account statement and purchase or sale confirmations and checks which relate to the securities or cash you claim, and any other documentation, such as correspondence, which you believe will be of assistance in processing your claim. In particular, you should provide all documentation (such as cancelled checks, receipts from the Debtor, proof of wire transfers, etc.) of your deposits of cash or securities with the Debtor from as far back as you have documentation. You should also provide all documentation or information regarding any withdrawals you have ever made or payments received from the Debtor.

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PLEASE CHECK THE APPROPRIATE ANSWER FOR ITEMS 3 THROUGH 9.

NOTE: IF "YES" IS MARKED ON ANY ITEM, PROVIDE A DETAILED EXPLANATION ON A SIGNED ATTACHMENT. IF SUFFICIENT DETAILS ARE NOT PROVIDED, THIS CLAIM FORM WILL BE RETURNED FOR YOUR COMPLETION.

		YES	<u>NO</u>
3.	Has there been any change in your account since December 11, 2008? If so, please explain.		X
4.	Are you or were you a director, officer, partner, shareholder, lender to or capital contributor of the broker?	7 k	X
5.	Are or were you a person who, directly or indirectly and through agreement or otherwise, exercised or had the power to exercise a controlling influence over the management or policies of the broker?		X
6.	Are you related to, or do you have any business venture with, any of the persons specified in "4" above, or any employee or other person associated in any way with the broker? If so, give name(s)	·	X
7.	Is this claim being filed by or on behalf of a broker or dealer or a bank? If so, provide documentation with respect to each public customer on whose behalf you are claiming.		X
8.	Have you ever given any discretionary authority to any person to execute securities transactions with or through the broker on your behalf? Give names, addresses and phone numbers.	- подпатите	X
9.	Have you or any member of your family ever filed a claim under the Securities Investor Protection Act of 1970? if so, give name of that broker.		X
	Please list the full name and address of anyone ass preparation of this claim form: <u>Deborah Clark-Wein</u> Kallas, LLC 1540 Broadway, 37th Floor, New Yor	raub. Whatley D	

IT IS A VIOLATION OF FEDERAL LAW TO FILE A FRAUDULENT CLAIM. CONVICTION CAN RESULT IN A FINE OF NOT MORE THAN \$50,000 OR IMPRISONMENT FOR NOT MORE THAN FIVE YEARS OR BOTH.

THE FOREGOING CLAIM IS TRUE AND ACCURATE TO THE BEST OF MY INFORMATION AND BELIEF.

Date _	02/16/2000	Signature Lary Larinson	
Date _		Signature	

(If ownership of the account is shared, all must sign above. Give each owner's name, address, phone number, and extent of ownership on a signed separate sheet. If other than a personal account, *e.g.*, corporate, trustee, custodian, etc., also state your capacity and authority. Please supply the trust agreement or other proof of authority.)

This customer claim form must be completed and mailed promptly, together with supporting documentation, etc. to: